STATE OF LOUISIANA
OFFICE OF CONSERVATION
GAS WELL DELIVERABILITY TEST

DISTRIC	т	OPERATOR			CODE		INPUT TYPE		DT 1 (1-78)
FIELD		ADDRESS			='			OC ONLY	
PARISH							2	ORIGINAL	
		PURCHASER					3	CORRECTION	
SIGNED				PAGE		OF	REPORT DATE		
	COMPANY AGENT		TITLE					MO.	YEAR

			COMPAN	IY AGENT		TITLE								MO.		YEAR					
WELL DATA								DE	LIVERAE	BILITY TEST	-	DATE OF									
SERIAL NUMBER	POOL AND LEASE NAME	WELL ASSIGNED NUMBER ACREAGE	PERFORATED INTERVAL FROM TO	GAS MCF/DAY	BARRELS/DAY CHOKI		CHOKE	KE GAS	API GRAV.	WELL HEAD PR	1	BHP IF RUN	LINE PRESS.	STATUS IF	IESI UK						
					COND.	WATER	/64"	GRAVITY 6	@ 60 F.	FLOWING PSIG	SHUT-IN PSIG	PSIG	PSIG	INACTIVE	STATUS (MM-DD-YY)						